

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	71158	7/2.99
O.I.P.E. CLASSIFIER	DN	m	7/19
FORMALITY REVIEW	EVB	66793	07/22/99 8/24/99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final Original	
1	6-20-01
2	7-22-01
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4	3-18-02
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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